

CLAIMS ONLY						Application Number 10/063,672	Filing Date					
						Applicant(s)						
						* May be used for additional claims or amendments						
CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT		*	*	*	*	*	
	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend
1	/		/		/		51					
2		/		/		/	52					
3				/		/	53					
4	/			/		/	54					
5		/		/		/	55					
6	/				/		56					
7		/		/		/	57					
8		/				/	58					
9						/	59					
10		/			/		60					
11		/				/	61					
12		/				/	62					
13						/	63					
14						/	64					
15						/	65					
16						/	66					
17						/	X					
18						/						
19						/						
20						/						
21							70					
22							71					
23							72					
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39							88					
40							89					
41							90					
42							91					
43							92					
44							93					
45							94					
46							95					
47							96					
48							97					
49							98					
50							99					
Total Indep	3		2		3		100					
Total Depend	17	←	17	←	17	←	Total Indep					
Total Claims	20		20		16		Total Depend	←	←	←		
							Total Claims					